

CLAIMS ONLY						Application Number <b>10-673887</b>		Filing Date <b>7-6-04</b>	
						Applicant(s)			
						* May be used for additional claims or amendments			
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT				
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	
1									
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50									
Total Indep	23								
Total Depend	1								
Total Claims	24								